

## LAW OFFICE DOUGLAS M. CLARKSON

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<del>Spe</del>cializing in Federal Intellectual Property Causes

Admitted New York and Georgia Bars Admitted United States Supreme Court

VIA AIR EXPRESS

January 15, 2001

Commissioner of Patents and Trademarks Box PATENT APPLICATION Washington, D.C. 20231

Re: A New Patent Application by Li, Wei METHOD OF CLOCK MISMATCH AND DRIFT COMPENSATION FOR PACKET NETWORKS

Sir:

Herewith is the above identified patent application, six sheets of drawings, a separate Small Entity Statement and an Assignment for recording, along with Forms PTO/SB/17, 21 & 1619A.

Also herewith is a check, total \$395.00 (the Filing Fee of \$355.00 and the Recording Fee of \$40.00). A duplicate of this letter and of the Form PTO/SB/17 are enclosed.

Respectfully submitted,

Douglas M. Clarkson Reg. No. 18,583

Attach.

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Signature

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		Application Number	
TRANSMITT	AL	Filing Date	
FORM		First Named Inventor	Li, W.
(to be used for all correspondence after	er initial filing)	Group Art Unit	
•	•	Examiner Name	
Total Number of Pages in This Subm	ission	Attorney Docket Number	10,896
	ENCL	OSURES (check	all that apply)
Fee Transmittal Form  X Fee Attached  Amendment / Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Response to Missing Parts/ Incomplete Application  Response to Missing Parts under 37 CFR 1.52 or 1.53	Termina  A (for an A)  X Drawing  Licensin  Petition  Provisic  Change Address  Termina  Reques	to Convert to a onal Application of Attorney, Revocation of Correspondence	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter  Other Enclosure(s) (please identify below):  Return Post Card
SIGNATU	JRE OF APPL	ICANT, ATTORNEY, OR	AGENT
Firm or Individual name Douglas	M. Clark	son	
Signature Mougla	y M	Clarke	יל
Date 1-15-0(			
	CERTIFIC	ATE OF MAILING	7
I hereby certify that this correspondence is being mail in an envelope addressed to: Commissione	deposited with	the United States Postal Servashington, DC 20231 on this	rice with sufficient postage as first class date:
Typed or printed name			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Date

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## FEE TRANSMITTAL Patent fees are subject to annual revision on October 1

These are the fees effective October 1, 1997. Small Entity payments must be supported by a small entity statement.

otherwise large entity fees must be paid. See Forms PTO/SB/09-12 See 37 C.F.R §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$)395.

Complete					
Application Number					
Filing Date					
First Named Inventor	Li.W.				
Examiner Name					
Group / Art Unit					
Attorney Dockel No	10 001				

METHOD OF PAYMENT (check one) FEE CALCULATION (c	
1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:  Deposit  The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:  Deposit  3. ADDITIONAL FEES  Large Entity Small Entity Fee Fee Fee Fee Fee Code (\$) Fee Description	
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106 330 206 165 Design filling fee 120 310 220 155 Filling a brief in support of an	1 appeal
107 540 207 270 Plant filing fee 121 270 221 135 Request for oral hearing	
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2. EXTRA CLAIM FEES  142 1.320 242 660 Utility issue fee (or reissue)	
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104 270 204 135 Multiple dependent claim if not paid	
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over original patent Other fee (specify)	
110 22 210 11 ** Reissue claims in excess of 20 and over original patent Other fee (specify)	
SUBTOTAL (2) (\$) 355, Reduced by Basic Filling Fee Paid SUBTOTA	(\$) <b>40</b>

SUBMITTED !	ВҮ		.,		Complete (if	applicable)
Typed or Printed Name	DOUGLAS	Μ.	CLKR	KSON	Reg Number	18,553
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